

PROFESSIONAL LICENSURE DIVISION[645]

Adopted and Filed Emergency

Pursuant to the authority of Iowa Code section 147.76, the Board of Physician Assistants amends Chapter 327, “Practice of Physician Assistants,” Iowa Administrative Code.

This rule making restores the language previously removed by the Board of Physician Assistants from subrule 327.4(2) regarding the frequency of visits to remote medical sites required of physicians supervising physician assistants working at the remote medical sites. Originally, subrule 327.4(2) required a supervising physician providing supervision to a physician assistant working at a remote medical site to personally visit the remote medical site at least once every two weeks, unless there were unusual or emergency circumstances that justified a deviation from the requirement. In July of 2014, the Centers for Medicare and Medicaid Services (CMS) removed the federal requirement for supervising physicians to visit remote medical sites at least once every two weeks.

Following CMS’s removal of the federal regulation, the Board of Physician Assistants took action to remove the requirement from its administrative rules as well. Amendments to subrule 327.4(2) were proposed under Notice of Intended Action and published in the November 26, 2014, Iowa Administrative Bulletin as **ARC 1741C**. The amendments were Adopted and Filed and published in the March 18, 2015, Iowa Administrative Bulletin as **ARC 1909C** and would become effective April 22, 2015. At a meeting of the Administrative Rules Review Committee (ARRC) on April 20, 2015, the ARRC imposed a session delay on **ARC 1909C**. Subsequently, 2015 Iowa Acts, Senate File 505, division XXXI, section 113, required the Board of Medicine and the Board of Physician Assistants to jointly adopt rules pursuant to Iowa Code chapter 17A to establish specific minimum standards or a definition of supervision for appropriate supervision of physician assistants by physicians. Subcommittees of the Board of Physician Assistants and the Board of Medicine met numerous times throughout the fall of 2015. On January 20, 2016, the Board of Physician Assistants voted to file Notice of Intended Action **ARC 2417C** (IAB 2/17/16), which is the joint rule mandated by the Legislature during the 2015 session. Finally, on February 5, 2016, the ARRC voted to impose an additional 70-day delay on the effective date of **ARC 1909C** and also authorized the Board of Physician Assistants to utilize emergency rule-making procedures to restore verbatim the text of subrule 327.4(2) that was in effect prior to the Board’s adoption of **ARC 1909C**.

Pursuant to Iowa Code section 17A.4(3), the Board of Physician Assistants finds that notice and public participation are unnecessary because on February 5, 2016, the ARRC authorized the filing of an emergency rule making for the purpose of removing regulatory uncertainty while new supervisory rules required by 2015 Iowa Acts, Senate File 505, division XXXI, section 113, move through the rule-making process.

Pursuant to Iowa Code section 17A.5(2)“b”(1)(a) and (b), the Board of Physician Assistants also finds that the normal effective date of this amendment, 35 days after publication, should be waived and the amendment made effective February 15, 2016, because the rule making confers a benefit on the regulated community by removing regulatory uncertainty and confusion that exist due to the procedural history of subrule 327.4(2), the Board’s efforts to amend the subrule, and the 2015 legislative mandate to file joint rules with the Board of Medicine.

This amendment is also published herein under Notice of Intended Action as **ARC 2440C** to allow for public comment.

A waiver provision is not included in this rule making because all administrative rules of the professional licensure boards in the Division of Professional Licensure are subject to the waiver provisions accorded under 645—Chapter 18.

The Board of Physician Assistants adopted this amendment on February 15, 2016.

After analysis and review of this rule making, no impact on jobs has been found. This rule making maintains status quo since **ARC 1909C** has been placed under session delay and has never gone into effect.

This amendment is intended to implement Iowa Code section 148C.3.

This amendment became effective February 16, 2016.

The following amendment is adopted.

Rescind subrule 327.4(2) and adopt the following **new** subrule in lieu thereof:

327.4(2) A supervising physician must visit a remote site to provide additional medical direction, medical services and consultation at least every two weeks or less frequently as specified in special circumstances. When visits are less frequent than every two weeks in unusual or emergency circumstances, the board shall be notified in writing of these circumstances.

[Filed Emergency 2/16/16, effective 2/16/16]

[Published 3/16/16]

EDITOR'S NOTE: For replacement pages for IAC, see IAC Supplement 3/16/16.